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ABSTRACT

Sign Talk Development Project (STDP) is a four-pronged project that grows out of needs identified through the program of Sign Talk Children's Centre (STCC). STCC is a bilingual/bicultural day care for children of deaf parents in Winnipeg, Manitoba. The center offers programming in two languages, American Sign Language (ASL) and English; and in two cultures, Deaf and Hearing, for children ages 2 to 5 years. Videotape and naturalistic data collected during the first year of the STDP are discussed. The percentage of children with language delays at STCC is 20%, significantly lower than that reported at the time of the initial assessment in 1988. Results are discussed with respect to hearing children of hearing parents; deaf children of deaf parents; deaf children of hearing parents, and hearing children of deaf parents. The future of the STDP is discussed. (Contains 2 references.) (Author/JP)

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"KIDS R BI-BI": SIGN TALK DEVELOPMENT PROJECT

Winnipeg, Manitoba

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ABSTRACT

Sign Talk Development Project (STDP) is a four pronged project which grows out of needs identified through the program of Sign Talk Children's Centre. Sign Talk Children's Centre (STCC) is a bilingual/bicultural day care for children of Deaf parents in Winnipeg, Manitoba. The Centre offers programming in two languages; American Sign Language (ASL) and English, and two cultures; Deaf and Hearing - for children ages two to five years. Sign Talk Children's Centre is the only bilingual/bicultural day care centre for children of Deaf parents in North America.

The Sign Talk Development Project was designed to:

1. Assess the children's spoken English language skills.
2. Observe, record and analyze the children's acquisition of ASL.
3. Train staff and parents to implement bilingual/bicultural programming based on assessment data collected by the Sign Talk Development Project.
4. Prepare a manual of guidelines and materials for implementing a bilingual/bicultural program with Deaf and hearing individuals.

Research findings collected during the first year of the Sign Talk Development Project are discussed in this article. The information provides insight into the language development of children within the context of a bilingual/bicultural environment for Deaf and hearing individuals.

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INTRODUCTION

The concept of a specialized day care for children of Deaf parents was generated by members of Winnipeg's Deaf Community at a "Deaf Pride" conference in April, 1985. In April, 1986 the Minister of Community Services identified STCC as high priority and allocated funds for twenty spaces. Numerous consultations were held with local service-providing agencies, the Provincial Day Care Office, the University of Manitoba and local Deaf organizations. In February, 1986 a parents' Board was formed, and in November, 1987 the Centre became operational.

Sign Talk Children's Centre was established by Deaf parents who wanted a day care centre that was culturally and linguistically sensitive to them and their children. STCC is set up in a number of ways: The program strengthens the family by encouraging the child's communication skills in both ASL and English; helps the child develop a sense of pride in both Deaf and Hearing cultures; and enables parents to communicate comfortably with the child's caregivers. The Centre enhances linguistic competence and positive self-identity in preparation for school and living within two cultures. The program is designed to create social acceptance of both Deaf and Hearing people as equals and thus "normalize" both Deaf and Hearing cultures. The program also offers parents the possibility of building support systems with other parents and/or exploring learning opportunities related to family issues.

Sign Talk Children's Centre currently serves 22 families, with a maximum of 20 children attending each day, totalling 23 children who are enrolled at STCC. Of these 23 children, 5 are Deaf and 18 are hearing. The bilingual/bicultural program is set up to respond to the children's unique needs for programming in two cultures (Deaf and Hearing) and two languages (ASL and English). Equal number of Deaf and Hearing staff work in the Centre to ensure that Deaf staff become models for ASL and the Hearing staff become models for English. This separation of languages by person rather than activity allows for a natural language identification, and the children quickly learn the distinction between the two languages and cultures. Weekly themes have been developed to enhance and reinforce language learning. Deaf and Hearing cultural events and activities have been incorporated into the daily program. The program is under constant review and revision. Our current physical space is limiting, however, we are excited about our upcoming move in January, 1994. The new space will provide for a truly bilingual/bicultural environment with such things as lower light switches, mirrors, half doors and flashing lights to name a few.

OUTLINE OF NEEDS ADDRESSED BY PROJECT

The Sign Talk Development Project (STDP) addresses specific needs identified during the initial year of operation (1988-89) of Sign Talk Children's Centre. These needs include: developing age-appropriate language skills (both spoken English and ASL) for each child, inadequacy of psycholinguistic models for ASL development, the need for specialized training of staff to facilitate bilingual/bicultural programming, and only limited resources and materials to implement bilingual/bicultural teaching.

Addressing these needs was not within the scope of regular staffing/budget parameters for STCC and hence, a short term development project was designed, the aim of which was the satisfaction of these needs. The resources, skills, and knowledge gained would then be fed into the regular STCC system. The nature of the STCC program is complex: it functions as a day care but in many ways the needs of the children and parents require a specialized preschool education program. STCC staff have been striving to accomplish objectives appropriate to an education program as well as maintaining a quality day care. The Sign Talk Development Project (STDP) was designed to contribute to this goal and enhance STCC's future functioning by training staff and developing a knowledge base.

INITIAL LANGUAGE ASSESSMENTS

In February, 1988 it was found that approximately 70 percent of the children attending STCC showed language delays in both ASL and English, the result of confused language input and language models. Delays of over one year were common. Staff found children with limited ways of expressing themselves in an age-appropriate manner, leading to frustration and the development of poor self esteem.

During interaction with their children, STCC parents were using a variety of sign systems, sign supported speech or speech only. Often the result was confused language input - making it difficult for the child to learn the current grammar of either English or ASL. Language delays seem to consistently correlate to clarity of language input, with families using ASL showing less evidence of delay. In these same families parents were also more clear about their own identity as members of a minority culture and felt a sense of pride in their language and culture. Recognition of ASL as a language is recent and many parents for a variety of reasons were not using ASL with their hearing children.

In attempting to develop programming to address the language delays, STCC staff were greatly hindered by the lack of any adequate means for assessing age appropriate ASL development. Without a norm for age appropriate acquisition of ASL, staff had no

way to accurately measure delays or chart progress, thus making effective programming almost impossible.

Nevertheless, STDP was developed to enhance the STCC program by providing a systematic approach to assessing children's language delays, in both English and ASL. Appropriate language evaluation, which provides staff and parents with specific goals, was necessary to meet the language needs of the children.

IMPLEMENTATION

a) Initial English Sample:
The first sample of English videotapes was collected during the week of April 27 - May 1, 1992. This involved samples of 18 hearing children enrolled at STCC, interacting with the English Language Specialist for approximately 30 minutes. Samples included a brief formal screening test, The Communication Screen (Striffler and Willig, 1980), and free play activities (picture books, toy house and people, tea party set).

The 18 videotaped English language samples were transcribed and analyzed, according to the Language Sampling, Analysis and Training technique (Tyack and Gottsleben), during the weeks of May 9 - 29, 1992. From this initial analysis, it was determined that 9 children required further testing to assess the exact nature of their English language delays/disorders. These assessments were conducted by the English Specialist from June 1 - 16, 1992. The results were documented and presented to parents and STCC Staff in individual parent meetings held during the week of June 22 - 26, 1992.

b) Naturalistic Samples of Children in STCC
The collection of these samples within STCC began in June, 1992. The children not videotaped at that time were taped during the first two weeks of August. Sample collection involved following the children with the video camera for a continuous 45 minute period during free play activities. These samples were not formally assessed at this time, as training in the area of sample analysis was not yet initiated. The naturalistic samples provided further information regarding the children's cultural behaviours and their ability to switch from one language to another.

c) Initial ASL Samples
The first sample of ASL videotapes was collected during the week of May 4 - 8, 1992. This involved samples of 18 hearing children and 5 deaf children enrolled at STCC, interacting with the ASL Specialist for approximately 30 minutes. Samples included a brief formal screening test (The Communication Screen) adapted into ASL from the English version, and free play activities (picture books, toy house and people, tea party set).

The 23 ASL videotapes (18 hearing children and 5 deaf children) were not formally analyzed at this time, as a formal analysis procedure for ASL skills has not yet been developed. A basic checklist of ASL development was established by the ASL Specialist and used to evaluate the videotapes during May 9 - 29, 1992. The results from this procedure were documented and presented to parents and STCC staff during individual parent meetings conducted during the week of June 22 - 26, 1992.

d) Second Set of ASL/English Samples

In discussion with the Evaluation Team (Dr. Michael Rodda, Dr. Carol Erting and Rita Bomak) and the ASL Consultant (Marie Phillip) in July, 1992, it was decided that the second set of videotaped samples would include each of the children in three different environments; 1) STCC, 2) Home, and 3) One-to-one with each of the Language Specialists. The samples would not be clearly ASL or English samples, but would show the language which the child naturally used in each of the situations. This process included meeting with all the STCC staff and parents to determine the best time and activity for videotaping each of the children both in STCC and at home. These meetings were held during September, 1992. A schedule was established and videotaping began on September 21, 1992 and continued until December 10, 1992.

Samples of each of the 21 children were collected in all three environments within a two week period except for 3 children where the time between samples was approximately one month. All of the families were willing to have the researchers videotape them in their homes, except for one. A sample was collected with the parents in the day care centre for that particular child.
In the case of 3 children, home samples were not completed due to time constraints.

The Language Specialists found it very helpful to collect samples in the children's homes - this provided a more complete picture of the children's language skills and the family's communication patterns.

The activities videotaped in each of the samples included:

1) Home - meal; game with siblings; story/game with parents (mother/father)
2) STCC - lunch; group/structured activity; free play
3) Researchers - picture description; movie re-telling

RESULTS AND DISCUSSION

The children attending STCC can be categorized into four groups:

1. Hearing children of hearing parents (5)
2. Deaf children of Deaf parents (2)
3. Deaf children of hearing parents (4)
4. Hearing children of Deaf parents (13)

The results of the language assessments will be presented within the context of these groupings.

a) Hearing Children of Hearing Parents:

In a centre that was established by Deaf parents for their children, it is curious to find hearing children of hearing parents in attendance. The hearing parents involved in STCC all have some connection with the Deaf community - either through their work, socially, or having Deaf family members. These children acquire English as their first language through natural exposure in the home. Similarly, hearing culture is acquired naturally. STCC plays the primary role in exposing the children to ASL and Deaf role models. They learn ASL as a second language, and may require more explicit teaching and explanation to learn Deaf cultural behaviours.

In the Spring '92 assessments, a total of 5 hearing children of hearing parents were videotaped; 3 children had hearing parents who worked in the Deaf community, and 2 children had Deaf siblings. The results of the ASL assessments indicated that 3 of the hearing children of hearing parents were learning ASL as a second language, i.e., their development in ASL was delayed relative to their English skills. One of the children had only recently been exposed to ASL (attending STCC for 4 months), and one of the children demonstrated a delay in his ASL development. This child had age-appropriate English skills, and his delay in ASL appeared to be related to a visual-spatial deficit.

The children were assessed again in the Fall, 1992, except for one of the children with a Deaf sibling who had moved on to Kindergarten at that time. The results indicated that one of the hearing children with hearing parents had developed age-appropriate ASL skills, although English continued to be his preferred language. This child was approaching 5 years of age and had been attending STCC since the age of 2 years. The remaining 3 children continued to demonstrate a pattern of learning ASL as a second language.

2) Deaf children of Deaf parents:

These children demonstrate a parallel development to hearing children of hearing parents, except the language and cultures are reversed. They acquire ASL and Deaf culture through natural exposure in the home. English, in written form, and hearing

culture must be taught and explained. The role of STCC for these families is to provide support for the home language and culture, to enable parents to communicate with caregivers in their first language, and to provide Deaf role models with which Deaf children can identify.

In both the Spring and Fall assessments, 2 Deaf children of Deaf parents were videotaped. The results of these assessments indicated that these children were both acquiring ASL age-appropriately.

3) Deaf children of hearing parents:
The experiences of Deaf children of hearing parents can vary significantly with regard to their exposure to language and culture. Frequently exposure to English and hearing culture occurs naturally in the home, but this is not fully accessible to them. Their acquisition of ASL is dependent upon the age at which exposure begins, the form of exposure, and the amount of exposure. The parents of these children experience a time of grieving, and this will influence the decisions they make about their child's communication and language from the options provided to them. The role of STCC for these families is to mitigate the grieving process by emphasizing and demonstrating Deaf people's abilities. STCC also provides all families members with exposure to ASL and Deaf culture, and role models with which the Deaf children can identify.

In the Spring, 1993, a total of 3 Deaf children with hearing parents were assessed. The results indicated that 2 children, who had recently enrolled in STCC at the age of 2 years, demonstrated emerging skills in ASL. The other child, who had entered STCC at the age of 4 years, had a significant delay in his development of ASL.

The children were again assessed in Fall, 1992, and a fourth Deaf child of hearing parents had recently entered STCC, also at the age of 2 years. This child's ASL skills were emerging. One of the children who had previously demonstrated emerging ASL skills, was now functioning age-appropriately in ASL. The other child with emerging ASL skills in Spring had made very little progress and was demonstrating a delay in his ASL development. The 5 year old Deaf child of hearing parents continued to present with delayed ASL skills.

4) Hearing children of Deaf parents:
The majority of children attending STCC fall into this category. We have also included children in this group who may have one Deaf parent and one hearing parent. The rationale being that they are provided with natural exposure to ASL within the home. These children acquire ASL and Deaf culture through natural exposure in the home. Although they are hearing, hearing behaviours may need to be taught or explained to them. STCC provides an important role

for these families by enabling parents to communicate with caregivers in their first language, providing exposure to English and hearing role models, developing a healthy pride in having Deaf parents, and providing the skills needed for the children to feel comfortable within the Deaf Community and the larger hearing society.

In the Spring, 1992, a total of 13 hearing children of Deaf parents were assessed. The results indicated that 7 of these children were using ASL at an age-appropriate level. One child was learning ASL as a second language, as one of his parents was hard of hearing and communicated with him primary through speech. Two children demonstrated emerging skills in ASL; one due to his young age, and the other due to his having one hearing parent and only recently enrolling in STCC. The remaining 3 children were delayed in their acquisition of ASL. It should be noted that these three children indicated a similar delay in their English skills.

The children were again assessed in Fall, 1992, except for 2 children who transferred to Kindergarten at that time. The results were similar to those noted in the Spring. Of the 11 children videotaped 7 hearing children of Deaf parents demonstrated age-appropriate ASL skills; 2 children were learning ASL as a second language (both had one hearing parent); and 2 children continued to demonstrate a delay in their language skills, both ASL and English.

CONCLUSION

The percentage of children with language delays at STCC according to our most recent assessments is approximately 20%; significantly lower than that reported in 1988, from initial language testing. It is felt that during the past five years of STCC's operation, the Deaf parents have seen the benefits of using ASL with their hearing children and have developed confidence and pride in doing so.

The most important conclusion drawn from the language assessment data, is that all children (whether they are hearing, Deaf, of Deaf parents or of hearing parents) have the potential to develop effective bilingual/bicultural skills when exposed to the appropriate environment and language models.

The Sign Talk Development Project will be completed in August, 1994. Future research will continue to contribute to the knowledge of the developmental sequence of American Sign Language. This project will also continue to provide appropriate intervention for children with communication delays, in English and ASL, within the dynamic of a bilingual/bicultural day care setting. This is accomplished by providing support and training for staff and parents, and by developing bilingual/bicultural resources and materials. Presently there are no materials available in Canada

related to training staff to work in a bilingual/bicultural day care setting involving Deaf and Hearing people. There are also very limited materials for teaching ASL and Deaf culture to preschool children. The development project will attempt to address the issue of materials for teaching within this setting. Curriculum and resources are constantly being reviewed and revised to meet the needs of the children and staff. The end result of the STDP will be a two-part manual which will include guidelines and resources for implementing a bilingual/bicultural program as well as documentation of the specific research that was conducted over the project's duration. This will be specific to STCC, but also of general value to any program with Deaf and hearing children, staff, or parents. In this sense, the Sign Talk Development Project will document the unique features of Sign Talk Children's Centre and establish it as a model program in North America.

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Sign Talk Children's Centre

Health & Welfare Canada
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The Communication Screen
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The views expressed herein are solely those of the authors and do not necessarily represent the official policy of the Department of National Health and Welfare.